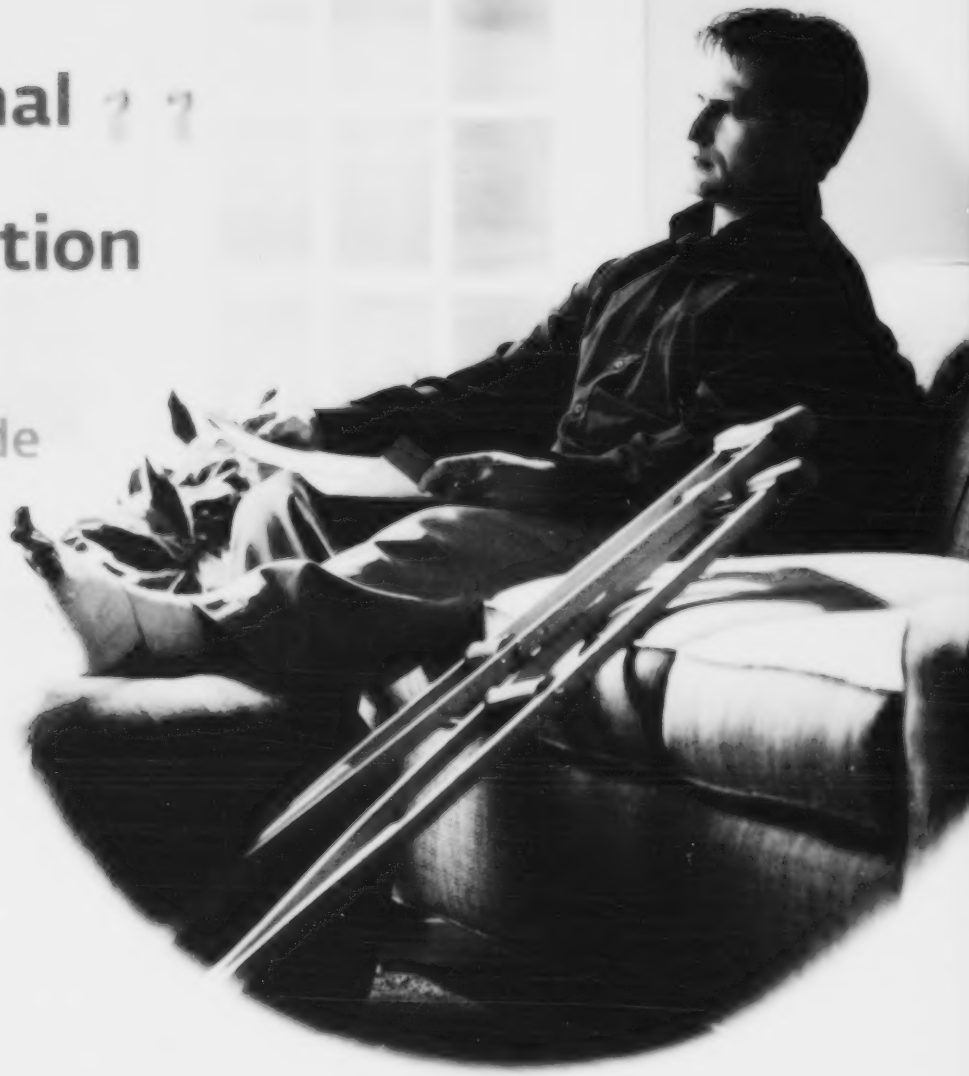
Personal Injury Protection Plan

Your Guide



Manitoba Public Insurance

Your Reference Page

Injury Claim Number

Vehicle Damage Claim Number

Date of Accident

Personal Injury Case Manager

Name

Telephone number

Best time to call

Vehicle Damage Claims Adjuster

Name

Telephone number

Best time to call

Manitoba law defines this insurance policy.

Unlike other insurance policies you may have, which are sold by private companies, Manitoba's Personal Injury Protection Plan is Manitoba law.

The Manitoba Public Insurance Corporation Act and its regulations set out types of coverage and eligibility for benefits. This law also describes how the Manitoba Public Insurance Corporation (MPI) operates. We must follow the law when we respond to a claim from a person injured in a motor vehicle accident.

The Manitoba Public Insurance Corporation Act is Chapter P215 of the Continuing Consolidation of the Statutes of Manitoba (C.C.S.M.).

The PIPP Regulations are Manitoba Regulations (Man. Regs.) 37, 38, 39, 40 and 41 of 1994. These reference materials are available in most public libraries and can be purchased from Statutory Publications, 200 Vaughan Street, Winnipeg, R3C 1T5, 204-945-3101.

This Guide provides information, not advice or legal interpretations.

This Guide describes the coverages and benefits available under the Personal Injury Protection Plan (PIPP). If any differences arise over interpreting what this Guide says and what the law says, the law applies.

Your Situation

you need medical treatment and have personal and medical expenses	**Medical and Personal Expenses** Section 1
you'll be off work for more than 7 days because of your injuries	**Income Replacement** Section 2
you can't care for a child under 16 or an adult dependant whom you were caring for before the accident	**Caregiver Expenses** Section 3
you need help caring for yourself and with basic household tasks	**Personal Care Assistance** Section 4
you have a permanent disability or scarring from the accident	**Impairment** Section 5
you need help returning to work	**Rehabilitation** Section 6
a family member died in the accident	**Death Payments** Section 7
you disagree with an MPI decision	**Appeals** Section 8

How this Guide can help you

This is your guide to how PIPP works and what entitlements it provides. Though it will likely answer most of your questions, it may not answer all of them.

That's where our staff can help. They're the most valuable source of information at your disposal.

If you need more information about PIPP, call your Case Manager or our general information line for help.

SECTION 1

Medical and Personal Expenses

YOUR COVERAGE

PIPP reimburses expenses medically required because of the accident.

PIPP also reimburses you for certain personal expenses resulting from the accident, including travel costs associated with medical treatment.

KEY POINTS

- PIPP covers medical, personal and travel expenses related to the accident injury. These expenses will only be reimbursed after a claim has been filed with us.
- We pay medical practitioners, dentists and other health care providers directly, in most cases. The amount covered is set in a fee schedule, established in consultation with the professional organizations.
- PIPP pays for medical treatment that contributes to your recovery and rehabilitation. It doesn't pay for treatment that has no measurable benefit to you.
- If you use your own car or a family member or friend drives you to medical appointments or treatment, car travel expenses are reimbursed at the rate shown on the sheet at the back of this Guide.
- Depending on your situation, PIPP may also reimburse you for parking, public transportation or taxi costs to attend medical treatment. You'll need pre-approval from your Case Manager to have these costs reimbursed.
- Include your original receipts when you claim for medical and personal expenses.
- Medical treatment unrelated to your accident injuries is not covered.

We share a goal: your recovery

You're expected to work toward your recovery and to participate fully in the rehabilitation program that your health care team believes will help you.

In principle, PIPP covers medical treatment expenses for as long as they're necessary. However, costs won't be covered indefinitely when a treatment shows no signs of helping you. At some point, we may ask you to consult another medical practitioner and try a different type of treatment.

Medical expenses

Manitoba Health provides primary health care coverage when you're injured in a motor vehicle accident. When you need additional treatment to fully recover, PIPP extends the health care safety net, paying for medically required treatment by a medical practitioner or prescribed by a physician and not paid for by any government health care program.

PIPP covers care by a dentist, optometrist, chiropractor, physiotherapist, registered psychologist or athletic therapist.

Some treatments are only covered when performed by certain health professionals. For example, PIPP covers acupuncture only when it's done by an accredited:

- medical doctor, or
- physiotherapist, or
- chiropractor, or
- dentist.

Massage therapy is only covered when done by a physician, chiropractor, physiotherapist or athletic therapist.

We must authorize dental treatment before treatment begins, except for emergency dental work just after the accident.

Your case manager can confirm that a specific treatment is covered. If in doubt, please check with us before starting treatment.

Most physiotherapists and chiropractors bill us directly

Most physiotherapists and chiropractors bill MPI directly for accident-related treatments. This means there is no direct cost to you for these treatments. PIPP covers these treatments provided they're medically necessary because of your injuries from the accident.

Claiming your expenses

If your claim is in Winnipeg

You'll get these five forms in the mail shortly after reporting your claim by phone:

- Application for Compensation — completed in all cases
- Record of Medical & Personal Expenses — excludes travel expenses
- Record of Travel Expenses — travel expenses only
- Medical Information Authorization — completed in all cases
- Initial Health Care Report — for your health care professional's completion

Complete the forms and return them to us with your original receipts for your expenses.

Once we've received the proper documentation from you, you can expect a cheque in the mail for your expenses, usually within a week.

If your claim is at a rural Autopac claims office

Your case manager will ensure you get the forms you need for any related expenses. Your case manager will help guide you through the process.

Recovering from Whiplash Injuries

Good news about whiplash

Usually, whiplash gets better on its own, without treatment.

While some people may still have some pain, they can go back to their normal activities at home and at work.

We cover these treatments for whiplash

- care by a medical doctor
- chiropractic
- physiotherapy
- athletic therapy
- massage therapy — *only when done by a doctor, chiropractor, physiotherapist or athletic therapist*
- acupuncture — *when done by a doctor, physiotherapist or chiropractor*

Here's a key point about how we cover treatments: ***together with medical professionals, we've set guidelines for whiplash treatments. To find out how these guidelines apply to you, ask your chiropractor or therapist.***

What to expect from your treatment

You should improve quickly, noticing less pain and stiffness. If you don't improve quickly, the treatment likely isn't working for you. Ask your health-care provider about your other choices. It's a bad idea to continue treatment that isn't working — it may make your whiplash worse. No treatment is risk-free.

Is treatment helping you?

Ask yourself these questions about your treatment. Your answers will help you decide if it's time to ask your health-care provider about other options. Or, it may be time to ask another health-care provider for advice.

- Am I feeling better than I felt a month ago?
- Do I know what treatment plan my health-care provider is following?
- Has my health care provider discussed treatment goals with me?
- Is treatment likely to make any difference? Is it really necessary?
- Have we reviewed my treatment plan in the last two months?
- Has my treatment plan changed to reflect the progress of my recovery?
- How will I know when treatment is complete or
  has done all that it can do for me?
- Am I still taking medicines that I only started taking after the accident?
- What will make me feel better?

If you answered "no" to any of the first six questions, or if you have any doubts about your treatment plan, talk to your health-care provider.

Medicines and medical supplies

PIPP covers the costs of over-the-counter and prescription medicines and medical supplies — for example, bandages, ointments and dressings — that you require because of the accident injuries.

Medical device expenses

We also cover the costs of purchasing, renting, repairing, replacing, fitting or adjusting devices that are medically required and prescribed because of the accident injuries. Devices covered include eyeglasses, hearing aids, back supports, special footwear, crutches and artificial limbs.

If the device wears out from normal use, we'll pay for its repair or replacement. Repair or replacement due to neglect, misuse or wilful damage isn't covered.

> Jason's right leg was severed above the knee in a car accident. PIPP will cover the cost of purchasing an artificial leg and will continue to pay for the repair and replacement of the artificial leg.

PIPP also covers the cost of repairing, replacing or adjusting a device that you had before the accident and that was damaged or lost in the accident or that no longer meets your needs because of the accident injuries. This is one-time replacement coverage.

> Paula broke her prescription eyeglasses when her head hit the sun visor in a car accident. PIPP will pay the costs of replacing her eyeglasses.

Original receipts

Please give us original receipts when you claim reimbursement for medical device expenses, medicines and medical supplies.

Ambulance services

PIPP pays the costs of transporting you by ambulance from the scene of the accident to the hospital.

We also pay for ambulance services when, because of the injuries in the accident:

- it's medically necessary to transfer you from one hospital to another
- the physician responsible for your treatment orders the ambulance service so that you can receive necessary treatment
- an emergency arises, requiring urgent transportation either by ground or air ambulance.

Coverage for attending to someone who needs critical care

PIPP covers out-of-pocket expenses for attending to a close relative in hospital requiring critical care because of an automobile injury. Up to two people are covered, for up to 21 days after the accident.

Expenses up to $3,700 in total are covered.

To be covered, you must be the injured person's:

- parent or guardian; or
- grandparent; or
- spouse, common-law partner, or fiancé; or
- adult child; or
- brother or sister.

The injured person must:

- be under 16 years old; or
- be in intensive care; or
- require an invasive examination or surgery, both under general anesthesia; or
- suffer from an unstable/life-threatening injury; or
- be near death.

We reimburse out-of-pocket expenses related to:

- authorizing the injured person's treatment; or
- persuading or influencing the injured person to take treatment; or
- helping administer treatment; or
- other medical or compassionate reasons at our discretion.

You must prove your expenses, and they must be for one or more of the following:

- transportation, parking and tolls
- accommodation and meals
- child care beyond the care you'd normally provide
- 90% of your net income lost, calculated the same way as Income Replacement Indemnity, but with no waiting period

These are not covered:

- visiting a hospitalized person who isn't in critical care
- escorting an injured person, when there's other PIPP coverage for it

PIPP also doesn't cover your expenses if they're covered by:

- *The Health Services Insurance Act*
- another policy of insurance
- social assistance
- any employment benefits (including sick leave or compassionate leave)
- any other plan or payment

Travel expenses to and from treatment or medical appointments

PIPP covers the costs of travel to and from medical appointments and treatments that are necessary because of the accident injuries.

We reimburse:

- car travel at the government of Manitoba rate when you drive your car, or a friend or family member drives you, to a medical appointment. Please refer to the sheet at the back of this Guide for this year's rate.
- parking costs when you use a private vehicle to go to a medical appointment
- public transportation costs
- taxi costs if you can't drive yourself and public transport isn't available or appropriate
- travel and accommodation costs for someone to accompany you to medical appointments or treatment if your age or your mental or physical condition prevents you from going alone

The 100 kilometre rule

You can choose where you want to receive medical care. However, PIPP limits coverage for travel expenses to a medical appointment or treatment to a maximum of 100 kilometres each way when similar care is available closer to your home.

Norma lives in a farming community south of Brandon. She's seeing a chiropractor twice a week for treatment of neck pain resulting from a car accident. Although there's a chiropractor in a town 20 km away, Norma prefers to see a chiropractor in Brandon, which is 110 km away. We'll cover Norma's travel expenses up to a maximum of 200 km (maximum of 100 km each way) per visit.

Questions and **Answers**

Q *I understand I have to submit original receipts to you, but the receipts from my pharmacy include other prescriptions unrelated to the accident and covered by my company's health plan. How can I provide both MPI and my company's health plan with the originals?*

A **We can return the original receipts to you after we've reviewed them. Just let us know that you need the original receipts back.**

Q *My husband and I were both injured in a car accident. We're going to a clinic for treatment every Monday morning and drive our own car. Can we both claim this travel expense?*

A **No. PIPP reimburses you for the costs you have from injuries in a motor vehicle accident. You and your husband don't have separate travel costs when you go to the clinic together. One of you can claim the expense.**

SECTION 2

Income Replacement

YOUR COVERAGE

You're entitled to income replacement, beginning on the eighth day after the accident, when:

- a motor vehicle accident caused the injury, and
- the injury prevents you from performing all or most of the main daily duties of the job you had at the time of the accident.

Income replacement covers 90% of your net employment insurance benefits, or lost wages, or salary, based on gross yearly employment income. Income replacement under PIPP has a maximum limit. You can buy extra coverage from us to increase this limit, if needed.

KEY POINTS

- Income replacement begins on the eighth day after the accident when injuries continue to prevent you from working.
- Income replacement starts after we've received income information from your employer or the required business records from you.
- Once income replacement payments begin, a cheque will be mailed or deposited directly into your bank account every 14 days, until you're no longer eligible for income replacement. Income replacement stops when there's no medical reason preventing your return to work.
- Income replacement is based on the income you were earning before the accident. Your past income tax returns and employment slips are the best ways to establish your income at the time of the accident.
- Income replacement is 90% of your net income, up to a maximum amount that's adjusted annually.

Where do you fit in?

Minor – someone under 16 years of age at the time of the accident

Student – someone 16 and over who was attending school full-time at the time of the accident

Special rules apply to Minors and Students. See the details later in this section.

Non-earner – someone who was unemployed at the time of the accident but was able to work

Part-time earner – someone who had a regular, part-time job of less than 28 hours a week at the time of the accident

Temporary earner – someone who, at the time of the accident, held a regular job of 28 hours a week or more, for less than 12 months before the accident

Full-time earner – someone who, at the time of the accident, had a regular, full-time job of at least 28 hours per week

Income replacement is for people who were working or could have been working

For someone who was working at the time of the accident:

Income replacement begins on the eighth day after the accident

PIPP provides income replacement to full-time, temporary, or part-time earners who cannot continue working because of their injuries.

For someone who could have been working at the time of the accident but wasn't:

Income replacement begins after 180 days

People who were employable but not employed at the time of the accident become eligible for income replacement for their determined employment 180 days after the accident, if they still can't work because of the accident injuries. However, if you can prove you would have held employment during the first 180 days, you'll be entitled to income replacement based on that job. There must be enough evidence to prove that you would have been employed had you not been injured.

For someone who couldn't work at the time of the accident:

No eligibility for income replacement

People who had a physical or mental illness that prevented them from working at the time of the accident aren't eligible for income replacement.

The law distinguishes between full-time earners and part-time, temporary and non-earners for a good reason. It would be unfair to lock in the income replacement paid to people who were employable and could have held full-time work but did not happen to be working full-time when the accident happened.

We reassess the employment status of non-earners, part-time earners and temporary earners if they are still unable to work because of the accident 180 days (six months) after it occurred.

Mario worked for 15 years as a shipper in a factory. Four months ago, the factory closed. He was lucky enough to find a new full-time job in a large retail outlet, but for less pay. Last week, Mario lost control of his car and was seriously injured. Mario is a temporary earner because he hasn't worked at his current job for one year. He will receive income replacement based on his salary at his new job for 180 days (six months). If he's still unable to return to work after 180 days, we'll reassess his employment status and base his income replacement on the type of work he was capable of doing at the time of the accident. Income replacement after six months won't be less than the amount he received for the first six months.

Determining employment 180 days after the accident: for part-time, temporary and non-earners

We determine employment for people who were part-time, temporary or non-earners at the time of the accident and who still can't return to work 180 days after the accident. Determining an employment means establishing the type of work that you could reasonably have been doing at the time of the accident. This employment then becomes the basis for income replacement and for your job search.

We determine the type of work you could have been doing at the time of the accident, even if you were actually doing other work.

To do this, we look at your:

- Education
- Training
- Work experience
- Physical abilities
- Intellectual abilities

Unless you could you only work part-time, at 180 days, we determine a full-time job for you. Your income replacement may go up or stay the same, depending on the job we determine for you.

After we determine an employment for you, you won't receive less income replacement than you received during the first 180 days after the accident.

Determination of employment is very important for two reasons. First, it may increase the income replacement you receive. Second, it establishes the type of work you're considered qualified to do when your injuries heal.

We usually require a medical specialist to assess your physical abilities after we determine your employment. If this specialist finds that you can do the determined employment, your income replacement stops. If this specialist finds you can't do the determined employment, then you'll receive income replacement based on the salary range for that type of employment.

Henry had an office job as a project manager for a mining company. Last summer, he became tired of paperwork, decided he wanted to get out of the office and transferred to a position in the mine. His salary was $100 less a week. On his way back to town one day, his car was sideswiped by a truck. Henry broke his collarbone and had internal injuries. He was classified as a temporary earner and received income replacement based on his salary as a miner.

Henry still couldn't return to work 180 days after the accident. We determined employment for Henry as a project coordinator. The doctor said he couldn't return to this type of work at the time so, 180 days after the accident, Henry's income replacement amount was increased to reflect his employment as a project manager. A few months later, Henry was able to return to the office job (his determined employment) and his income replacement ended.

Residual earning capacity

Full-time earners and people for whom employment was determined 180 days after the accident

Sometimes, an accident causes injuries that prevent you from returning to exactly the same kind of full-time work you did before the accident. However, you're capable of working at a different type of job. The insurance industry refers to this as "residual earning capacity." This means you can still earn income, although maybe not in the same kind of job or at the same pay level as before the accident.

We'll determine an employment for you if, two years after the accident:

- you're able to work, full- or part-time,
- you've recovered as much as you are likely to recover from the accident injuries, and
- you've explored all viable employment rehabilitation options and can't return to either the kind of work you were doing at the time of the accident or the employment we determined for you 180 days after the accident.

We'll use the following criteria to determine the type of employment you're able to do two years or longer after the accident:

- education
- training
- work experience
- physical abilities as they are now (after the accident and recovery)
- intellectual abilities as they are now (after the accident and recovery)
- knowledge or skills acquired during a rehabilitation program, if applicable

The determined employment will be full-time employment, unless you can only work part-time because of the accident injuries. It will also be based on employment normally available where you live.

We identify the type of employment that best matches your skills and training and your post-accident abilities and capacity. Before we determine employment for you, a case manager will meet you to answer your questions. Once we officially inform you, in writing, of the employment determination, you begin the "job search year."

During the job search year, income replacement continues, so long as you continue to be eligible for the benefit. We will reduce your income replacement by any income you earn during the job search year.

When the job search year is over, there are three possibilities:

1 *You have work that pays the same or more than the income replacement you've been receiving.*

Income replacement ends.

2 *You're working at a job that pays less than the income replacement you've been receiving and less than your determined employment.*

We'll reduce the income replacement you've been receiving either by:

- how much your job pays; *or*
- how much your determined employment pays;

whichever is greater.

That may leave you with some income replacements benefits to "top up" your income.

Finding Work

We can help you find work by providing you with job search counselling and training to improve your interviewing and resume writing skills. Please understand, though, that getting work is mostly up to you.

3 *You have not found work.*

Income replacement will be reduced by the income set for your determined employment.

Dale was a high school teacher when he was injured in a car accident. He has been receiving income replacement of $1,250 every two weeks and has taken courses to retrain as a community counsellor. He finds a job that provides a net income of $1,000 every two weeks. Dale will continue to receive $250 of income replacement every two weeks to "top up" his new employment income.

• • •

Marilyn was receiving income replacement of $1,600 based on the salary she was earning as a real estate agent at the time of the accident. After two years, we determined her employment to be a travel agent because her injuries permanently prevented her from driving a car, essential for a real estate agent, and she had previous experience in the hospitality and travel industry. Marilyn didn't find work during her job search year. At the end of the job search year, her income replacement was reduced by $1,500, which is the amount set for her determined employment.

Income replacement ends when you can return to your old job or work at your determined employment

Income replacement replaces income you would be earning had you not been in the accident and become unable to work. Except for the most serious and disastrous accidents, income replacement is a temporary measure to compensate for your loss of income while you recover from the effects of the accident.

You're no longer eligible for income replacement when:

- you're able, once again, to do the work you were doing at the time of the accident
- you're able to work at the employment that we determined for you 180 days after the accident
- you're able to do work that pays as much as, or more than, the amount used to calculate the income replacement paid to you at the start of your claim.

Special rules apply to the end of income replacement for employed people over 60 years of age at the time of the accident and for people who are receiving income replacement when they turn 65. Please refer to the information on seniors later in this section.

Your gradual return to work

It may not be possible for you to return to full-time work right away. You can return to work gradually and still receive income replacement. Talk to your case manager about your plans for returning to work and about the effect on your income replacement.

A recurrence of the disabling condition caused by the accident

Occasionally, an injury that seems to have healed flares up. Income replacement can resume when a disabling condition caused by the accident comes back. PIPP provides you with a safety net in this situation.

If you return to work and the injury flares up, it's important to identify the cause. You also need to contact your case manager to explain what has happened. In most cases, income replacement, at the same level you were receiving before your return to work, will resume immediately, without a seven-day waiting period.

Steps in calculating income replacement

To calculate your income replacement properly, we need accurate and complete information from you.

Step 1 – We classify your employment status

We classify your employment status based on your employment situation at the time of the accident: full-time earner, part-time earner, temporary earner, non-earner, minor, student, or someone who couldn't work at the time of the accident because of a physical or mental condition. This classification relates to the amount of income replacement you'll receive and to the need to reclassify your employment status in certain cases. Those who are ineligible for income replacement won't progress beyond Step 1.

Step 2 – We establish your gross yearly employment income

Gross yearly employment income is the total of gross yearly income from salaried employment and self-employment. For the income replacement calculation, we consider all the employment income that you lose because of the injuries from the accident including Employment Insurance benefits or National Training Allowance benefits.

2a – Salaried employment

We include all these amounts as income from salaried employment:

- wages or salary, including vacation pay
- overtime
- declared tips
- commissions
- bonuses
- cash value of your personal use of a company vehicle
- value of the employer's contribution to your pension plan
- cash value of your share of a profit-sharing plan
- other benefits that are part of your employment compensation package

  For example:
  - employer contributions to a health plan
  - a reduced interest rate on a loan
  - the payment of professional fees
  - housing provided by your employer
  - remote location bonuses

Remember, PIPP replaces income that you lose because of the injuries you had in the accident. So, for example, if your company continues to pay into your pension plan while you're off work, you won't receive income replacement for that portion of your income.

2b – To establish your salaried employment income

We need a completed Employer's Verification of Earnings (E.V.E.) form to pay you income replacement. Please ask your employer to complete the form and return it to us as quickly as possible. Your case manager can help you if you're having trouble getting the necessary employment income information.

We may also ask you for other documents to verify your employment income, especially if your employer fails to return a properly completed E.V.E. form to us.

2c – Self-employment

Self-employed people work for themselves, not for someone else. Independent contractors, sole proprietors, unincorporated farmers and members of unincorporated partnerships are all self-employed. People who work for their own incorporated company are not self-employed. They are employees of their privately owned company.

Because self-employment income can vary greatly from year to year, the gross yearly employment income of a self-employed person is determined by:

- your most recent business year,
- your most recent fiscal year,
- an average of your income from two or three business years, or
- the pro-rated, average gross income for your class of employment, whichever of these amounts is highest.

2d – To establish your self-employment income

For businesses that are only a few months old, a statement listing income sources may be sufficient to establish your self-employment income. For businesses that have been operating for more than a few months, we need to see income tax returns, financial statements or tax assessments.

2e – Other considerations

There are many details concerning the way we calculate gross yearly employment income that we can't describe here. Your case manager can explain how we factor in, for example, shift premiums, periodic overtime, seasonal fluctuations in income, sick credits and vacation time when establishing gross yearly employment income. The key is to make sure that we have all the information we need to do the calculation.

Step 3 – We calculate your net income

Net income approximates your actual "take home" pay before the accident. Your net income is calculated from your taxable income.

Here are the deductions from gross yearly employment income that establish taxable income. Some of these deductions may not apply to you.

- the basic personal credit
- the age credit (for people over 65)
- the married person's credit (regardless of your spouse's income)
- the equivalent to married credit (when you have a dependant and no spouse)
- the dependant's credit (regardless of the dependant's income)
- employment insurance premiums
- Canada Pension Plan contributions
- child and spousal support payments

A case manager will complete a worksheet with information on your age, marital status, number of dependants and other tax information. We follow income tax rules that applied during the year prior to the year in which we are making the calculations.

Step 4 – We calculate income replacement

Income replacement is 90% of net income (the amount calculated in Step 3).

This amount will be paid to you every two weeks, until:

- you return to work,
- your income replacement is adjusted for reasons discussed in other parts of this Guide,
- you're eligible for a Retirement Income Benefit, or
- you're no longer eligible for income replacement.

However, there are some situations in which other amounts you're paid under other programs will be subtracted from your income replacement.

If, for example, because of the accident you receive a disability benefit from the Canada Pension Plan, your income replacement will be reduced accordingly.

Maximum amount of gross yearly employment income for PIPP calculations

We'll never use an amount higher than the maximum insurable Gross Yearly Employment Income amount when calculating your income replacement. You'll find this year's maximum on the sheet at the back of this Guide.

> Ben is a highly skilled heavy equipment operator who regularly works overtime. For the last three years, his income has been over $75,000 a year. In April 2008, he was hit by a car. He was off work for four months. During this time, he received income replacement based on a yearly income of $73,500, the maximum coverage in 2008.

Worker's Compensation payments

Employees covered by Worker's Compensation are entitled to Worker's Compensation benefits for lost income if they can't work because of a job-related injury. If the job-related injury happened in a motor vehicle accident in Manitoba, the employee also qualifies for income replacement coverage and other benefits under PIPP. Employees therefore can choose between collecting benefits under the Worker's Compensation Plan or PIPP.

Benefits under Worker's Compensation and PIPP are not identical. It's in your interests to contact both the Worker's Compensation Board (WCB) and MPI to get information about the coverage to which you are entitled. Then, you can make a decision about the plan from which to receive benefits.

The telephone number for the WCB is at the end of this Guide.

Minors: children under the age of 16

PIPP pays a minor:

- a lump sum indemnity for each school term the minor doesn't complete because of injuries from the motor vehicle accident, and
- income replacement for any income the minor would have been earning but can't earn because of the injuries from the accident.

PIPP definitions:

minor – child under the age of 16

elementary school – Kindergarten to Grade 8

secondary school – Grade 9 to Grade 12

A school year begins – on July 1 and ends on June 30, for the purposes of calculations under PIPP.

A lump sum indemnity is only payable when a minor would have completed the school year except for the accident. The indemnity becomes payable on July 1 for the loss of part or all of the preceding school year. The indemnity amounts for this year are on the sheet at the back of this Guide.

Josh is 15 and in Grade 10. He also works in a fast-food restaurant on Friday nights and weekends. He's injured in a car accident in August and misses the whole year of school and has to quit his job while he recovers from his injuries and works at his rehabilitation.

Josh will receive income replacement to cover the lost income from his part-time restaurant job and a lump sum payment (see amount on the sheet at the back cover of this Guide) for his missed year of schooling.

Entitlement to a lump sum indemnity stops at the end of the school year in which the minor turned 16. When minors reach 16 and still can't work because of the accident injuries, income replacement begins, based on the Industrial Average Wage for Manitoba. The Industrial Average Wage is set using Statistics Canada data for the earnings of all employees in Manitoba. This year's Industrial Average Wage for Manitoba is on the sheet at the back of this Guide.

Income replacement continues according to the eligibility criteria described in this section.

We may also determine employment for minors who can work.

Students

PIPP pays a student:

- a lump sum indemnity for each school term the student doesn't complete because of injuries from the motor vehicle accident, and
- income replacement for any income the student would have been earning but can't earn because of the injuries from the accident.

Under PIPP, a student is at least 16 and was enrolled full-time in a secondary or post-secondary school at the time of the accident.

PIPP provides a lump sum indemnity to students who miss a portion or all of an academic year because injuries in an accident prevent the student from attending school.

Students (16 or older) who miss a full year of secondary school or post-secondary school because of the accident injuries receive a maximum lump sum indemnity. This year's amount is on the sheet at the back of this Guide.

If the student misses one term of school, the lump sum is pro-rated. For example, if there are three terms in the student's secondary school year and the student misses one term, PIPP will pay the student one-third of the lump sum indemnity.

When the student loses a full school year, the lump sum indemnity is paid on July 1, following the lost school year. When the student loses a term or semester of the school year, the lump sum indemnity is paid at the beginning of the next term or semester.

These lump sum payments continue until the scheduled end date for the student's current level of studies. For example, the end date would be the end of high school if the student was in high school, or the end date for completion of a degree if the student was in college or university. If the student still can't work **or** return to the studies underway at the time of the accident because of the accident injuries, PIPP pays income replacement based on the Industrial Average Wage. This income replacement will continue for as long as the claimant meets the eligibility criteria.

We may also determine employment for students who can work.

People 65 and older

This applies to people in one of these three categories:

- someone 65 years of age or over and who is not employed at the time of a car accident
- someone 65 years of age or over and is employed at the time of a car accident
- someone being paid income replacement and turns 65

People 65 years of age or over at the time of an accident and not employed are not eligible for income replacement or the Retirement Income Benefit (R.I.B.).

> Walter is a 66-year-old retired factory worker. He's in a car accident and has injuries affecting his ability to sit or stand for long periods of time. Walter doesn't qualify for income replacement or an R.I.B. because he's over 65 and wasn't working at the time of the accident. There's no income to replace. Walter will receive the other PIPP benefits to which he's entitled.

An employed person who's 65 years of age or over at the time of an accident is entitled to income replacement if injuries in a vehicle accident prevent the person from working. We calculate the income replacement for an employed person who's over 65 in the same way as for other claimants. Five years after the date of the accident, if the person still can't work because of the accident injuries, the person may become eligible for the R.I.B. and income replacement ends.

> Martha is 67 and still working as a secretary in a lawyer's office, a job she's had for 35 years. She's in a car accident in May 2004. Her injuries include a serious brain injury that will prevent her from ever returning to work. Martha will receive income replacement based on her salary until May 2009 (five years after the accident). Then, she'll be eligible for an R.I.B.

For claimants 65 years or older, income replacement ends when:

- the claimant is no longer disabled, or
- the claimant has received income replacement for five years.

If a person became eligible for income replacement before he or she turned 60, income replacement ends when the person can return to work or turns 65. In this situation, someone receiving income replacement at the age of 65 will be eligible for an R.I.B.

If a person became eligible for income replacement when he or she is over 60, income replacement continues for five years (if the person continues to be unable to return to work because of injuries from the accident). Then, the person will be eligible for an R.I.B.

The Retirement Income Benefit (R.I.B.)

R.I.B. took effect on March 1, 1999. It's meant to provide a retirement income, for life, for people who have an ongoing disability because of a motor vehicle accident and, as a result, can't save adequately for their retirement years.

To receive R.I.B., you first need to complete an application. The information you give us on your application helps us confirm if you qualify for a R.I.B.

The R.I.B. is 70% of your net income minus any other pension income you receive, including Canada Pension Plan and Old Age Security payments. If the person's pension income is more than 70% of the net income used in our calculation, the person won't receive an R.I.B.

The R.I.B. is adjusted on each anniversary after you became entitled to it, according to the Consumer Price Index.

People who receive an R.I.B. must:

- inform us of any changes in their pension income, and
- provide us with a certified copy of their income tax return every year.

The R.I.B. won't be paid to a person who returns to work and earns the same amount of money as before the accident. A person's eligibility for the R.I.B. is subject to the same rules applying to income replacement. All other income you earn is subtracted from your R.I.B.

Criminal Code convictions and income replacement

In general, PIPP covers injuries from a vehicle accident, no matter who caused the accident or how it happened. But if the person who caused the accident is convicted of a *Criminal Code* offence related to the accident, income replacement will be reduced for the first 12 months after the accident. In these cases, two factors affect how much less income replacement will be:

- the injured person's fault for the accident: for example, if the injured person was 50% at-fault, income replacement reduces by 50%; and
- how many dependants the injured person has.

If a person is convicted in the United States for a crime related to the accident, it will have the same impact on income replacement as if the offence occurred in Canada.

No income replacement will be paid to a person who is in prison.

To speed up your claim

Here are some things you can do to speed up your claim for income replacement:

- Make sure we have all the information we need about your employment income at the time of the accident.
- Answer our requests for information as quickly as you can. We can't begin regular income replacement payments until we have all the required documents.

Questions and Answers

Q ***Why don't I receive income replacement for the first seven days I missed work after the accident?***

A The seven-day waiting period is like a deductible in other insurance policies — you share a small part of the loss. But, you're covered for the more substantial loss when you're off work for more than a week. This protects more seriously injured people who need income replacement long-term, and keeps the overall cost of coverage down.

Q ***I was collecting Employment Insurance at the time of my accident. My injuries are serious enough to prevent me from looking for work at this time so I'm no longer eligible for Employment Insurance. Do I qualify for income replacement?***

A Yes. Income replacement will replace 90% of the net benefit you were receiving from Employment Insurance. However, income replacement will only continue for the time you were eligible for employment insurance.

Q ***My car flipped over on an icy road and I was in hospital for two months, then in rehab for six months. I'm now able to return to work. When I contacted my employer, I was told that my full-time job had been taken by someone else and that there was no work for me. I'm able to work at my old job but there's no work for me. Can I still get income replacement?***

A Yes. Income replacement continues temporarily for full-time or part-time earners who have lost a job because of the accident. Ordinarily, income replacement would end as soon as you were able to return to work at your old job. However, income replacement will continue as follows:

- for 30 days, if you were eligible for income replacement for 90 to 180 days
- for 90 days, if you were eligible for income replacement for 181 to 365 days
- for 180 days, if you were eligible for income replacement for more than one year but less than two years
- for one year, if you were eligible for income replacement for more than two years.

Q ***I have been collecting income replacement since March 1999 and turned 65 in April 2004. Am I eligible for the Retirement Income Benefit?***

A Yes. You were receiving income replacement when the Retirement Income Benefit came into effect so you are eligible for it. Contact your case manager.

Q ***I have been doing the bookkeeping for my husband's greenhouse business for the last five years. I don't get paid. Last week, I was in a car accident and my injuries are preventing me from doing the bookkeeping work at this time. Are the costs of hiring someone to do this work until I'm able to do it again, covered?***

A Yes. PIPP covers the cost of hiring someone else to do your work, up to a maximum weekly amount. Please refer to the sheet at the back of this Guide for the amount covered at this time. The coverage can continue for 180 days while you can't do the bookkeeping because of the accident injuries. After 180 days, the compensation ends, even if you still can't do the work. However, if you're still disabled after the 180 days, you'll be entitled to income replacement based on a determined employment.

SECTION 1

Caregiver Expenses

YOUR COVERAGE

Full-time caregivers

You're eligible for a Caregiver Weekly Indemnity when:

- your main job before the accident was caring for a child or children under 16 or an adult who couldn't hold employment because of poor physical or mental health, and
- you can't continue to provide this care because of your injuries.

Part-time caregivers

You're eligible to have care expenses reimbursed when:

- you cared for a child or children under 16 or an infirm adult part-time before the accident, and
- you can't continue to provide this care because of your injuries.

KEY POINTS

Caregiver Weekly Indemnity

- For full-time caregivers
- The weekly amount depends on how many children under 16 and adults who can't work you were caring for at the time of the accident. The indemnity will be adjusted when circumstances change, for instance, when a 15-year-old turns 16.
- If, 180 days after the accident, your injuries continue to prevent you from caring for children under 16 and adults who can't work, you have a choice. You can receive income replacement based on your determined employment, or you can continue to receive the Caregiver Weekly Indemnity. After 180 days, you cannot receive both income replacement and the Caregiver Weekly Indemnity. Your case manager will explain this choice to you. Also, see section 2 on determining employment.

Dependant care expenses

- For part-time caregivers
- You're entitled to be reimbursed for extra caregiver expenses resulting from the accident, if, at the time of the accident, you were:
  - working full-time, or
  - working 28 hours or more per week part-time, or
  - attending school full-time, and were 16 or over and you were caring for a child under 16 or an adult who can't work.
- Dependant care expenses will not be reimbursed when your spouse can provide the care.

Coverage for people who can no longer care for others

PIPP covers people injured in motor vehicle accidents who, at the time of the accident, were caring for children under 16 or adults who can't work. There are two different types of coverage.

Full-time caregiver

People whose main occupation was caring for children under 16 or adults who can't work and were unemployed or working part-time at paid employment are eligible for the Caregiver Weekly Indemnity.

Part-time caregiver

People who were working full-time, working more than 28 hours a week part-time or were over 16 and full-time students, and who were also caring for children under 16 or adults who can't work are eligible to have their unexpected, accident-related caregiver expenses reimbursed.

You're eligible if you can't continue to care for children or an infirm adult because of your injuries.

At the time of the car accident, Martine was a full-time mother, taking care of her three children, all of whom were under five. She broke her leg and her wrist in the car accident and couldn't clothe, bathe or supervise her children. Martine received the Caregiver Weekly Indemnity during the four months it took for the injuries to heal and for Martine to again be able to care for her children unassisted.

* * *

At the time of the car accident in which he injured his back, Stephan worked full-time and took care of his father, who lived with him. Stephan's father uses a wheelchair and needs help getting into and out of bed. While Stephan's back healed, he had to hire someone to help his father in the mornings and in the evenings. PIPP paid this caregiver expense when Stephan provided the receipts, which were below the weekly maximum amount PIPP covers.

Children under 16

The Caregiver Weekly Indemnity and the reimbursement of caregiver expenses are available when you can't care for a child under 16 years of age because of the accident injuries. When a child turns 16, coverage relating to that child ends, unless the child requires care because of a mental or physical disability.

Adults who can't work

The Caregiver Weekly Indemnity and the reimbursement of caregiver expenses are available when you can't care for a person over 16 who is regularly unable to work for whatever reason — a mental or physical disability, for example — when you were caring for that person at the time of the accident. We consider the answers to the following questions to determine if an adult is unemployable and relies on your care:

- Is the person unable to hold employment?
- What type of care were you providing to this person?
- How do the accident injuries prevent you from providing this care?

Laura's mother has Alzheimer's disease and has been living with Laura for the last year. Laura doesn't work. She has been preparing meals for her mother and going with her whenever she needs to leave the house for fresh air or appointments. Laura was injured in a car accident and now can't care for her mother because of the injuries. Laura is eligible for the Caregiver Weekly Indemnity.

Amount of the Caregiver Weekly Indemnity

The Caregiver Weekly Indemnity depends on how many children under 16 and adults who can't work you were caring for at the time of the accident. "Care" includes bathing, dressing, feeding, lifting and supervising. It doesn't, however, include housekeeping-type activities, such as doing laundry and cleaning. If you can't continue to do these household tasks because of the accident injuries, personal care assistance coverage applies. (Please see Section 4 for more information on personal care assistance coverage.)

The sheet at the back of this Guide lists the maximum amounts of the Caregiver Weekly Indemnity this year.

180 days after the accident

If, 180 days after the accident, you still can't work and can't care for a child under 16 or an adult who can't work, you have the option of continuing to receive the Caregiver Weekly Indemnity or of receiving income replacement based on your determined employment. Section 2 explains how we determine employment for you.

Your case manager will talk to you about this option and calculate how much you'd receive based on income replacement for your determined employment.

Coverage of dependant care expenses

You are eligible to have certain child-care and adult-care expenses reimbursed, up to PIPP's weekly maximum, when, at the time of the accident, you were:

- working full-time,
- working at a temporary job,
- working more than 28 hours a week at a part-time job, or
- a student,

and, although your main occupation was not caregiving, part of your daily activities involved caring for a child under 16 or an adult who can't work. "Care" includes bathing, dressing, feeding, lifting and supervising.

Type of dependant care expenses covered

Coverage for dependant care expenses helps pay for hiring someone to take over your caregiving duties when the accident injuries prevent you from performing them. The expenses must be related to the accident injuries and not routine expenses you were paying before the accident. You're only eligible for the coverage if you don't have a spouse or if your spouse can't take over your caregiving duties because of work, studies, disability or illness.

Martin is a computer programmer who, at the time of the car accident, was working four days a week and staying at home to care for his three-year-old son, Trevor, one day a week. During the four days Martin worked, Trevor was in day care. Martin's wife, Becky, works five days a week.

Because of the accident, Martin can't work or care for Trevor. PIPP will pay one day a week of the day care costs — the expense of having Trevor in day care one extra day a week — until Martin can care for his son again.

In addition, one night a week, Becky takes a management-training course at the local community college. On that night, Martin needs help bathing Trevor and putting him to bed. We'll cover the costs of having someone care for Trevor, provided the total caregiving costs are below the weekly maximum allowed. We cover this cost because Becky can't care for Trevor when she's in school. If Becky were to go out in the evening for social reasons, to a movie with friends, for example, we wouldn't pay the cost of caregiver help for that night.

Maximum weekly amount of dependant care expenses

We reimburse the actual caregiving expenses you have up to a weekly maximum. Please refer to the sheet at the back of this Guide for the maximum amounts payable this year.

Speeding up your claim

We need proper receipts to reimburse you for dependant care expenses. Please make sure that the receipts you give us are dated and identify the care provided and the person or company who provided it.

Questions and **Answers**

Q *Before my accident, I was working night shifts and was home for my seven-year-old after school. While I'm in the hospital and rehab, there's no one at home to care for him and he has to stay at the school after-school program until his dad picks him up. Will you pay for this after-school care?*

A Yes. We'll reimburse you the costs of after-school care for your son. However, there's a weekly maximum amount for this type of caregiver expense.

Q *At the time of my accident, I was working 10 hours a week in a fast-food restaurant and taking care of my 18-month-old daughter the rest of the time. Because of the injuries I had in the accident, I can't work and I can't bathe or lift my daughter. Will I get both income replacement and the Caregiver Weekly Indemnity?*

A Yes. You are eligible for both the Caregiver Weekly Indemnity and income replacement, which will be calculated based on your part-time gross yearly employment income for the first 180 days.

SECTION 4

Personal Care Assistance

YOUR COVERAGE

PIPP covers the expense of hiring someone to care for you when accident injuries prevent you from caring for yourself. The level of coverage depends on the extent of your disability.

KEY POINTS

- PIPP reimburses you, up to a monthly limit, for personal care assistance when, because of the accident injuries,
  - you can't care for yourself. This includes things like bathing and eating.

    or
  - you can't do all the essential tasks of daily life by yourself. Essential tasks of daily life include preparing meals, housekeeping and shopping.

  This coverage is only available for personal needs and daily living tasks that **you were doing yourself** before the accident.
- Whether you qualify for **Personal Care Assistance** depends on what you can and can't do for yourself. To qualify, your need for assistance must reach a minimum level. Your Case Manager will arrange to have your needs assessed.
- Coverage, up to a maximum amount, depends on how much assistance you need.
- You can hire whomever you want to help you. Once we have approved the expenses, we will reimburse you when you provide a receipt with details about the service and the person who performed it. PIPP reimburses you based on your actual expenses for the care provided.
- Usually, your ability to care for yourself and your daily needs will improve as you recover. We re-evaluate personal care assistance needs at regular intervals.

Your need for personal care assistance

Coverage depends on how much your injuries prevent you from doing activities you need to do regularly. These activities include:

- getting into and out of bed
- dressing and undressing
- eating
- washing
- using the toilet
- using facilities in your home and neighbourhood, such as the telephone, television and local library
- preparing breakfast, lunch and dinner and washing up afterwards
- light housekeeping — vacuuming and dusting, for example
- housekeeping — washing floors, cleaning the fridge and stove, for example
- doing laundry
- shopping for food, household supplies and other necessities

When someone else was doing a task for you before the accident, you're not eligible for assistance with the task after the accident.

Payment of personal care assistance expenses

To calculate your maximum entitlement to personal care assistance, we assess your personal care needs. The greater are your needs, the greater is your entitlement, up to the monthly maximum.

Your case manager will meet with you to talk about your need for personal care assistance and about the coverage available to you. We'll send you a letter stating the maximum amount we'll reimburse for your personal care expenses each month. The full amount is only available to someone who is seriously disabled and was completely self-sufficient before the accident.

We can pay the service provider directly

If you prefer, you can ask us to pay directly the person or company assisting you.

You choose who assists you

You can choose who helps you with personal care and daily living needs. You can pay family members, friends and neighbours to help you or hire a professional.

We review all claims to make sure the expense is reasonable, the time required to perform the service is realistic, and the amount paid for the service is within the normal range for similar services.

Keep in mind that you employ the person or company who assists you. MPI isn't responsible for their work in any way.

Speeding up your claim

We can reimburse you for personal care assistance expenses more quickly when the documents you submit are complete, including all the necessary information about the service provider — who, what, when and how much.

Questions and Answers

Q *My personal care assistance entitlement was calculated at $1,436.85 last year. I actually only spend $1,000 a month to have someone in to help me with some of the things I can't do myself. When the maximum amount available for personal assistance expenses is adjusted to reflect increases in the cost of living on March 1 this year, will I get more money?*

A No. We reimburse you for your actual expenses, so the readjustment of the maximum amount of eligible expenses won't change the amount you're reimbursed.

Q *I've been submitting receipts for personal care assistance expenses for three months since the accident. My case manager phoned to arrange an appointment with me. She said that an occupational therapist would be with her. What's this all about?*

A We ask an occupational therapist or other health care specialist to reassess your needs regularly. In most cases, injuries heal after a few weeks or months and, over time, you can probably take on more personal tasks.
You can't be reimbursed for personal expenses when you no longer need someone to help you.

SECTION 5

Impairment

YOUR COVERAGE

You're entitled to a lump sum payment when, because of a motor vehicle accident, you permanently lose normal physical or mental function or you're permanently scarred or disfigured.

KEY POINTS

- An impairment is permanent damage to a part of your body. Examples of impairment include scarring, facial disfigurement, loss of mobility in a limb, amputation of a part of the body and removal of an organ.
- The law describes different types of impairments and assigns a percentage value to them. The most serious and disabling impairments are assigned the highest percentages.
- We assign your permanent impairment a percentage of up to 100%. That percentage is your portion of the maximum indemnity payable at the time of accident. For example, if your permanent impairment is 50%, we pay you half the maximum indemnity.
- The lump sum impairment payment is made after treatment has been completed, the injury has healed as much as possible and the extent of the impairment can be properly assessed. This may take a year or more, depending on the injury.

Permanent impairments

PIPP provides a one-time payment when the motor vehicle accident caused impairment that will last throughout your lifetime. "Impairment" means you've lost a normal physical or mental function or that you're scarred or disfigured from the accident injuries.

Here are a few examples of permanent impairments:

- permanent scarring from burns
- loss of hearing
- disfiguring facial injuries
- amputation of a finger
- removal of a kidney
- permanent paralysis
- brain damage causing permanent short-term memory loss

Whiplash is not a permanent impairment.

The permanent impairment payment depends on the extent of your impairment. The type of work you did before the accident or your need for help with personal care after the accident doesn't affect the permanent impairment payment. These factors could, however, affect other benefits you receive under PIPP, such as income replacement and personal care assistance expenses.

Bob is a carpenter who earns $30,000 a year and Pete is a store manager who earns $45,000 a year. They're in a motorcycle accident and both of them lose the use of their right arms as a result. Bob and Pete will receive exactly the same permanent impairment payment.

Types of impairments

We have a long list of different types of impairments, including everything from the loss of part of a finger to the loss of body movement from a spinal cord injury.

We base the amount of the permanent impairment payment on the percent that the list assigns to the impairment. For example, the amputation of an index finger is listed at 10%. If the accident didn't cause you any other impairments and you didn't have any pre-accident impairments, that's the figure we'll use to calculate the impairment payment.

When an impairment isn't specifically listed, we use the listed impairments as a guideline.

Your case manager consults with your doctor and MPI medical services team to establish the type and degree of impairment resulting from the motor vehicle accident.

Multiple impairments and impairments from before the accident

When you have more than one impairment from the motor vehicle accident, we factor together the percentages for the different impairments to establish the amount of the payment. This is more complicated than simply adding the percentages together.

George was in a serious car accident. His injuries healed within a few months, but he has permanent deep scars on his left leg and loss of mobility in his left shoulder. He also has a permanent scar above his left eye. We take the percent for each impairment and then determine the adjusted percent to use to establish the permanent impairment payment.

When you already had an impairment before the accident, an additional impairment might have more serious consequences for you. We take this into account when calculating the permanent impairment payment.

Anne broke her right ankle in a workplace accident, resulting in a permanent loss of mobility in that ankle. A year later, she suffered serious damage to her left knee in a car accident, resulting in permanent impairment to her knee. Anne will receive an enhanced permanent impairment payment to compensate her fairly for the impact of the accident on her mobility.

The amount of the permanent impairment payment

The formula for calculating the permanent impairment payment is set out in the law. We multiply the percent for the impairment by the maximum lump sum amount for the year in which the accident occurred. The maximum amount is adjusted to the Consumer Price Index on March 1 each year.

Please refer to the sheet at the back of this Guide for the lump sum payment amounts that apply this year.

Paul broke his baby toe when the bicycle he was riding was clipped by a truck on March 31/08. As a result, he can no longer bend his toe. This impairment is set at .25%, which when multiplied by $133,099 (2008 maximum) equals $332.75. Paul will receive $665, the minimum permanent impairment payment (2008).

* * *

Jessica was in a serious car accident on April 10, 2008, and as a result is a quadriplegic. Her type of quadriplegia is set at 100% so she will receive a permanent impairment payment of $133,099 (2008 maximum).

Timing of the permanent impairment payment

In most cases, we must wait until your injuries have had a chance to heal so that your doctor can assess the exact extent of the permanent impairment. Depending on the injury, it can take a year or more to establish the extent of the impairment and therefore the amount of the permanent impairment payment.

Speeding up your claim

Please speak to your case manager if your doctor tells you that you'll have a permanent impairment from a motor vehicle accident. Your case manager will tell you what documents MPI needs to process your claim. In some cases, we may ask you for photographs of scars, for example, along with a doctor's report.

Criminal Code convictions and impairments

If you are convicted of a crime because of the accident and at-fault for the accident, you'll lose some, or all, of your impairment payment. The more you were at-fault, the more of your impairment payment you'll lose. If you were 50% or more at-fault, you'll lose all your impairment payment.

Questions and Answers

Q ***I was in a car accident and my face was badly cut. My doctor is recommending plastic surgery. How will this affect my permanent impairment indemnity?***

A The permanent impairment payment is made after treatment for the injuries has been completed and there's been adequate time for healing. We'll assess the permanent impairment when treatment is complete. The decision to have plastic surgery is yours, with the advice of your doctor.

Q ***I lost three of my permanent teeth when my bicycle was hit by a car. Is that a permanent impairment?***

A Yes. Losing permanent teeth in a motor vehicle accident is a permanent impairment. There's a percent value assigned according to the tooth's location in the mouth and its state of health before the accident — healthy or already in poor condition.

Q ***I have a whiplash injury from a car accident and have been off work for several weeks because of the pain and discomfort. Will I receive a permanent impairment payment?***

A No. The permanent impairment payment is paid when there is lasting, measurable damage to a part of your body. Whiplash injuries are soft-tissue injuries and are not covered.

SECTION 6

Rehabilitation

YOUR COVERAGE

PIPP aims to help you back to your normal activities as soon as possible after the accident. If your injuries are too severe to do this, then PIPP helps you find alternatives.

KEY POINTS

Our goal is to help you resume your normal pre-accident activities as much as possible. To assist your recovery and offset economic hardship, we provide compensation for treatment costs and a range of economic losses.

- Rehabilitation coverage includes, where appropriate:
  - home renovations
  - transportation assistance and vehicle modifications
  - services, such as assessments and treatment by specialized health care practitioners
  - equipment, such as specialized kitchen aids
- The type of rehabilitation assistance you receive depends on many factors, including your medical condition, employment options, retraining possibilities and commitment to recovery.
- If you can't return to your pre-accident job, we'll help you identify other employment options. Again, the kind of help we'll provide depends on the individual's circumstances. The options include job search assistance, on-the-job training or other training.
- The medical/rehabilitation team recommends appropriate rehabilitation strategies in a Rehabilitation Plan. The team includes you, your doctor and your case manager. MPI makes decisions about rehabilitation funding.

Rehabilitation — getting to where you want to be

As your insurer, our goal is helping you return to the situation you were in before the accident. Sometimes, this goal is easily met within a few weeks. Sometimes, it takes longer. In the most serious cases, it's not possible for you ever to be exactly as you were before the accident. Rehabilitation coverage provides you with various types of support to assist your recovery and your return to normal activities, to the greatest extent possible.

Rehabilitation coverage is flexible and depends on each claimant's personal situation and needs. Unlike other parts of PIPP coverage where the entitlement to a benefit or indemnity is precisely set in the law, rehabilitation expenses are considered extraordinary expenses that depend on individual circumstances.

We ask these kinds of questions when deciding on coverage for a rehabilitation expense:

- Is this rehabilitation strategy necessary for this person?
- Is it advisable?
- Is this rehabilitation strategy likely to help this person lead a more independent and productive life?

We look at the Rehabilitation Plan and the recommendations of the medical/rehabilitation team when making our decision.

The role of the medical/rehabilitation team

The composition of your medical/rehab team depends on the type of injuries you had and the type of treatment you're receiving. Your medical/rehab team usually includes the health care practitioners who are working most closely with you — your doctor, chiropractor, physiotherapist, rehab counsellor and nurses, for example — as well as your case manager, possibly other MPI staff, members of your family and you.

You are the most important person on the medical/rehab team. It's your commitment to recovery and to your Rehabilitation Plan that will be a deciding factor in whether or not a rehabilitation expense seems necessary and advisable.

The medical/rehab team prepares a Rehabilitation Plan and recommends strategies that it believes will facilitate your independence and employment. MPI staff make the final decision on rehab funding.

Employment and training support

PIPP coverage helps you get back to work. Financial help available to you depends on the type of injuries sustained in the accident and your post-accident skills and abilities.

The goal, if possible, is for you to return to the same employer to do the same work you were doing before the accident. If returning to your previous employment is impossible and you don't have the skills for other employment that will recapture your lost income, we can help retrain you. For example, we might provide vocational counselling or training courses. We can also assist you with resume writing and with your job search.

Gloria worked as a shipping clerk. After the car accident, she couldn't manage the physical demands of the job, which requires a lot of walking and bending. Her employer offered her an office job, but she needed computer skills that she didn't have. PIPP paid for Gloria's computer training so that she could return to work for her pre-accident employer.

Alterations to your home

When a serious disability requires it, we may pay for alterations to your home so that you can better manage your daily needs independently. For example, PIPP might cover the cost of installing special bathroom fixtures or more easily accessible kitchen counters. PIPP may also cover moving costs if your home is no longer suitable for your needs.

Danny had a spinal cord injury in a car accident and now uses a wheelchair. At the time of the accident, he was living in a third floor apartment in a building without an elevator. PIPP paid the costs related to moving to a ground floor apartment and adapting it to accommodate his wheelchair.

Alterations to your vehicle

In some serious situations when the injuries you sustained in the accident are permanent, we'll pay to adapt your vehicle so that you can continue to drive it, despite your injuries. PIPP also covers alterations to vehicles owned by you or your immediate family so that you can travel in the vehicle as a passenger.

Stephanie, age 11, was hit by a car. She is paralysed from the waist down and uses a specialized wheelchair. PIPP paid for alterations to the family van so that Stephanie can get in and out of it easily and safely.

Special equipment

Your medical/rehab team may determine that special equipment would assist you with daily living or workplace tasks. For example, PIPP might pay for a hospital-type bed or for an orthopaedic insert for your office chair. Depending on the situation, we'll provide equipment to you or rent or purchase it for you.

Your rehabilitation plan

Your medical/rehab team will work with you to develop a Rehabilitation Plan. The Plan will set out the expected length and goals of treatment. It may also include milestones and a schedule of times to re-evaluate the Plan.

The Plan is personal to you and your situation. It should realistically reflect what you can achieve through treatment, effort and time. It can also identify expenditures that could help you to achieve these goals. Your commitment to the Rehabilitation Plan and your ongoing efforts to follow it are the keys to your recovery.

Questions and Answers

Q ***I was in a car accident five years ago. At that time, PIPP paid for changes to my car so that I could drive it without using my legs, which were seriously injured in the accident. Having the car makes it possible for me to get to and from work. Will the costs of adapting a replacement car be covered?***

A Yes. Because you need to adapt your car as a result of the injuries you had in the car accident, PIPP will cover the costs. When it's safe and economical to do so, we'll pay for transferring the special equipment from your current car to your new one. When that's not possible, we'll pay the costs of installing new equipment in your new car. We won't, however, pay the costs of returning your used car to the condition it was in before the adaptations were added.

Q ***I work in the movie projection business. I was in a car accident and off work for several weeks. Now that I'm ready to go back to work I've been told there's no job for me. The industry is moving away from film projection to video and I'm unlikely to find more work as a projectionist. Will PIPP pay for me to get retraining for another type of employment?***

A No. Your loss of employment is not related to the accident so PIPP can't pay for retraining.

SECTION 7

Death Payments

YOUR COVERAGE

PIPP pays a lump sum to close family members and covers grief counselling for them when a family member dies in a motor vehicle accident. PIPP also reimburses funeral and related expenses.

(The limits are outlined on the sheet at the back of this Guide.)

KEY POINTS

- PIPP reimburses funeral expenses, including transporting the deceased and the cost of a grave marker, up to the maximum. We pay these expenses directly or reimburse the deceased's estate if the bills have already been paid.
- The spouse or common-law partner and dependants of someone who died because of a vehicle accident receive lump sum payments. The amounts depend on a number of factors, including the deceased's age, the deceased's gross yearly employment income and the age of dependent children.
- PIPP also pays the costs of grief counselling for the deceased's immediate family members by a professional counsellor, to the limit noted on the sheet at the back of this Guide.

Funeral expenses

PIPP covers the cost of funeral expenses up to a maximum shown on the sheet at the back of this Guide, including taxes.

You can arrange with your case manager for us to pay funeral expenses directly. Or, the estate of the deceased can pay the expenses and we'll reimburse the estate. In that case, please provide us with original invoices.

Funeral expenses include, for example, the cost of transporting the deceased, funeral home services, cremation, a cemetery burial plot and a grave marker. Your case manager can provide you with more specific information about the type of expenses that are covered.

Death payments

PIPP pays a lump sum to the deceased's spouse or common-law partner and dependants when the deceased died as a result of a motor vehicle accident.

- If the deceased did not have a spouse, common-law partner or dependants, then the deceased's non-dependent children and parents are eligible for a payment.
- If the deceased had dependent children but no spouse or common-law partner, the dependent children will share the amount that otherwise would have been paid to the spouse.
- If the deceased had no immediate family members, then no lump sum payments are made.

Amount paid to the deceased's spouse or common-law partner

Spouse means someone married to and living with the deceased at the time of the accident.

Common-law partner means someone living with, but not married to, the deceased in a conjugal relationship:

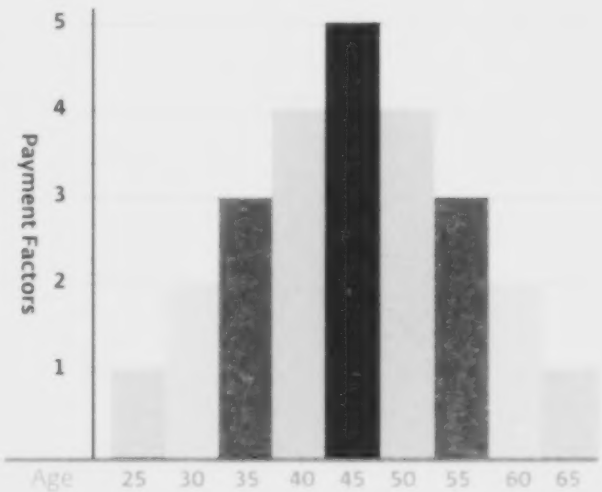
- for three years or more immediately before the accident, or
- for one year or more immediately before the accident while sharing parenthood of a child with the deceased.

When the deceased was employed at the time of the accident, the death payment depends on:

- the deceased's gross yearly employment income at the time of death, and
- the deceased's age.
- the death payment will be at least the minimum for that year.

More information on how we calculate the gross yearly employment income is in Section 2.

To calculate a death payment, we multiply the deceased's gross yearly employment income by a payment factor. This table shows how payment factors change depending on a person's age. You can see the highest payment factor of 5 occurs when the deceased is 45. In turn, that means the highest payment occurs when the deceased is 45.



When a deceased wasn't employed at the time of the accident and wouldn't be entitled to income replacement, the deceased's spouse or common-law partner receives a minimum lump sum payment. Please refer to the sheet at the back of this Guide for the current minimum amount.

Amount paid to the deceased's dependants

A dependant is:

- the deceased's child who was under 18 at the time of the accident, or
- the deceased's child who was substantially dependent on the deceased at the time of the accident, or
- a person who was married to the deceased but was legally, or in fact, separated from the deceased, or
- a person who was married to the deceased but is now divorced and who, at the time of the accident, was entitled to receive support payments from the deceased according to an agreement or court judgement, or
- a parent of the deceased who was substantially dependent on the deceased at the time of the accident.

Amount paid to the deceased's dependants in a single-parent family

When a single parent dies in a car accident, PIPP provides two different death payments to the deceased's dependants. The death indemnity that would have been paid to a spouse or common-law partner, had there been one, is divided equally among the dependants. They also each receive the death indemnity as dependants. This payment structure provides some additional financial support, recognizing that dependants of a single parent killed in a car accident may have limited financial resources

Derek was killed in a car accident. At the time, he was an employed 40-year-old single parent. His 15-year-old dependant son was in high school. Derek's son will receive a death indemnity, based on his age, as well as the death indemnity that would have been paid to Derek's spouse or common-law partner.

Amount paid when the deceased had no spouse, common-law partner or dependants

When the deceased doesn't have a spouse, common-law partner or any dependants, the deceased's parents and grown-up children will each receive a lump sum payment.

Additional payment amounts when a dependant is disabled

A disabled dependant is entitled to an additional lump sum payment when the person who was providing support dies as a result of a motor vehicle accident.

A person is disabled if he or she has a mental or physical disability that makes it unlikely that he or she can work. The disability must have already existed at the time of the accident.

Criminal Code convictions and death payments

If you were convicted under *The Criminal Code* related to the accident, your conviction reduces a death payment you might otherwise be entitled to.

How much your payment reduces depends on:

- your percentage of at-fault for the accident
- how many dependants you have

The more at-fault you are for the accident and the fewer dependants you have, the larger is the reduction. Your payment could even reduce to zero.

Grief counselling

PIPP pays the costs of grief counselling for the immediate family members of a person who was killed as a result of a motor vehicle accident. Please speak to your case manager if you have any questions about finding a grief counsellor or having the expense covered by PIPP.

Speeding up your claim

Before we can pay the death indemnity to a spouse, common-law partner or dependants, we need a few documents. We'll need an original or true copy of the death certificate, the marriage certificate and the children's birth certificates, when applicable. If a dependant is disabled, we'll also need a letter from a physician outlining the nature of the disability.

SECTION 8

Appeals

YOUR RIGHTS

It's your right to ask for a review of our decision when you disagree with it. If you're not satisfied with the review decision, you have the right to appeal that decision to the Automobile Injury Compensation Appeal Commission.

KEY POINTS

- When there are changes in your situation, you can provide us with information about the changes and ask us to reconsider decisions we've made.
- If you disagree with a decision, you can ask for it to be reviewed. The office that handles the review is separate from our claims department.
- You have 60 days from the date you received a letter informing you of our decision to ask for it to be reviewed.
- You can appeal a review decision to the Automobile Injury Compensation Appeal Commission. The Commission is completely separate and independent from MPI.
- You have 90 days from the date you receive a review decision to file an appeal with the Automobile Injury Compensation Appeal Commission.

Changes in your circumstances

Something may happen that changes how much compensation you should receive. If circumstances affecting your compensation change, please bring it to our attention. We'll reassess coverage, recalculate compensation based on new information and make the necessary adjustment to ensure that you receive the correct compensation.

If you don't agree with a decision . . .

Occasionally, disputes about compensation arise. If you can't resolve a dispute with your case manager, the next step is to ask MPI to review the decision. You have 60 days from the time you receive a decision letter to ask for a review.

If you're not satisfied with the results of the review, you can appeal to the Automobile Injury Compensation Appeal Commission (AICAC).

Step 1 - An MPI internal review of the decision

MPI's Internal Review Office handles these reviews. It operates independently of the Claims Department.

You'll need to put your request for a review in writing. You can get a copy of the Application for Review of Injury Claim Decision form from MPI claims offices or you can call the Review Office. The telephone numbers are at the back of this Guide. Special assistants in the Review Office can answer any questions you may have.

On the form, describe the decision you want to have reviewed and the reasons why you believe it's wrong. You can include documents, such as a doctor's report, to support your position. If you don't have the documents to attach to the form, list the documents that you'll be sending later. The Review Officer won't start the review until your documents have been received. Remember, though, that you must ask for the review within 60 days of receiving your case manager's decision.

If you'd like to meet with the Review Officer to explain your situation, check the box marked "hearing" on the Application for Review form.

The Review Officer will contact you to set up a time to meet. You can bring someone with you to this meeting or ask someone to represent you at it. You can also arrange a time to talk to the Review Officer on the telephone.

Whether or not you choose to speak to the Review Officer, he or she will thoroughly examine your file. The Review Officer can also conduct an investigation to get more information.

The Review Officer can overrule your case manager's decision, change it or decide that it's right. You'll receive the Review Officer's decision by registered mail. If you don't want to accept this decision, you can appeal it to AICAC. You have 90 days from the time you receive the Review Officer's decision to write to AICAC and request an appeal.

Step 2 - An appeal to the Automobile Injury Compensation Appeal Commission (AICAC)

AICAC is a special tribunal whose operation is completely separate from MPI. Commissioners are appointed by the Manitoba government and AICAC is administered by the Department of Consumer and Corporate Affairs.

You can appeal MPI's decision regarding your entitlement under PIPP or the amount of that entitlement.

To file an appeal with AICAC, phone their office directly. The phone number is in the telephone directory at the back of this Guide. AICAC staff will explain how to complete the Notice of Appeal form and remind you to send the form back to them within 90 days from the time you received the Internal Review Officer's decision.

Step 3 - An appeal of AICAC's decision

AICAC's decision on your case is final. However, if your case involves jurisdiction or law, you may be able to appeal AICAC's decision to the Court of Appeal. To do so, you'll need approval from a judge of the Court of Appeal.

Other options

MPI Fair Practices Offices

Although this office is part of MPI, it's at an arm's length from your claim. The Fair Practices Office helps ensure that MPI handles claims ethically, honestly and impartially.

This office can review any customer concern about legislation and policy. It can also review individual claims to ensure customers are being treated properly.

You'll see the phone number in the telephone directory at the back of this Guide.

The Provincial Ombudsman

The Ombudsman is completely independent from MPI and can review any complaint you have about MPI's operations and administration. The Ombudsman has the legal authority to recommend changes to our position on a particular issue if he or she believes it's justified.

The Ombudsman's phone number is in the telephone directory at the back of this Guide.

The Claimant Adviser Office

If you're appealing our decision about your PIPP claim, the Claimant Adviser Office can help you. It operates independently of both MPI and AICAC, and its services are free.

Here's how to reach them:

Claimant Adviser Office
#200 – 330 Portage Ave.
Winnipeg, Manitoba R3C 0C4

Phone: 204-945-7413
Fax: 204-948-3157
Toll-free: 1-800-282-8069, ex 7413
Deaf Access Line TTY: 1-800-855-0511
E-mail: cao@gov.mb.ca
Hours: 8:30 a.m. to 4:30 p.m.
Monday To Friday

Reasons we refuse, reduce, suspend or end compensation

Our role is to compensate you for economic losses resulting from the injuries you had in a motor vehicle accident and to provide you with the benefits that you are entitled to under PIPP. We share with you the objective of getting you back to the way you were before the accident, as much as possible.

We also have a financial responsibility to everyone in Manitoba. We must be good managers of the money Manitobans have paid for their insurance premiums. We do our best to only pay claims that are honest and valid.

We may refuse to pay a claim or reduce or suspend the amount we are paying when:

- a person knowingly provides false or inaccurate information to us
- a person does not go to a medical examination arranged by us or interferes with the examination, without a valid reason
- a person does not follow the rehabilitation program made available by us, without a valid reason
- a person refuses or does not follow medical treatment recommended by a medical practitioner, without a valid reason
- a person refuses to return to former employment, leaves employment that he or she could continue to hold or refuses a new employment, without a valid reason
- a person refuses to provide us with information requested or to sign the necessary forms so that we can get the information, without a valid reason
- a person acts in such a way as to delay or prevent recovery from the accident injuries, without a valid reason.

Telephone Directory

MPI Call Centre
- Winnipeg 204-985-7000
- outside Winnipeg 800-665-2410
- TTY/TDD 204-985-8832

MPI Review Office — Special Assistants 204-985-7088
Fair Practices 204-985-8117

Automobile Injury Compensation Appeal Commission 204-945-4155

Statutory Publications 204-945-3101

Worker's Compensation Board
- Winnipeg 204-954-4321
- outside Winnipeg 800-362-3340

Manitoba Ombudsman 204-982-9130

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Personal Injury Protection Plan
Your Guide

Manitoba Public Insurance

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